



COMMUNICATION BETWEEN MOTHERS-DAUGHTERS REGARDING EMOTIONAL CHANGES: ASSOCIATION OF FREQUENCY AND COMFORT

Suma K G

Assistant Professor, Department of Social Work, Vijaynagar Srikrishna Devaray University, P G Centre Nandihalli, Sandur, Ballari-583119, Karnataka, India.

ABSTRACT

The purpose of this study is to evaluate the association between the frequency of communication and the level of comfort mothers feel while discussing emotional changes with adolescents. Adolescents undergo significant physical, social, and psychological changes before reaching adulthood. The quality of parent-teenage communication is linked to handling various emotional changes in children. This type of communication can help minimize their risk of participating in risky activities. Their mothers may not support their daughters' decisions regarding sexual activity and illegal drug use—the present study comprised two blocks in Ballari District: Sandur and Hospet. A descriptive research design was used to achieve the study's objectives, which combined quantitative and qualitative methods. The interview schedule was used to collect data from the respondents. This research sampled a total of 200 respondents by random sampling.

KEY WORDS: Adolescents, Mother, Communication, Emotional Changes.

INTRODUCTION:

Adolescence is a critical period of human development characterized by physical, social, and psychological changes culminating in acquiring a stable adult position. Adolescence is becoming a vital developmental stage, not just a passage from infancy to maturity. Adolescence establishes new behaviors, canalizes educational, financial, and interpersonal paths, and generates new epidemiology of disease load (Patton & Viner, 2007). Numerous studies have connected several of these changes to puberty, the biological process that results in reproductive capability and is a hallmark adolescence event (Sisk & Foster, 2004).

One of the defining characteristics of teenage growth is the rapid shift in social behaviors. Adolescents exhibit increased self-consciousness, create more complicated and significant peer interactions, experience sexual impulses, form romantic relationships, and display a greater capacity to understand others than younger children (Steinberg & Morris, 2000).

The onset of these behaviors correlates with physical changes associated with puberty, leading to the theory that puberty's social, behavioral changes are caused by increased pubertal hormone levels, perhaps directly affecting brain structure and function (Forbes & Dahl, 2010).

When young girls enter puberty, they will feel a broader spectrum of emotions. At times, it may seem like a "storm" of emotions enveloping them, ranging from anger to despair. The daughter may struggle with confidence concerns for the first time in her life. Fortunately, around the end of adolescence, emotions begin to stabilize. They may recur during your daughter's period. Often referred to as PMS (premenstrual syndrome), the hormonal changes that occur each month around your daughter's menstruation may cause worry, irritability, insomnia, and depression (Family Doctor, 2017).

The changes that adolescents experience during their early years also affect their social lives. During this time, they tend to move into a new school environment, become more independent, and experience more negative life events. During adolescence, children feel isolated and less likely to interact with their peers. This transition also leads to an increase in adverse life events (Csikszentmihalyi & Larson, 1984).

It has been shown that bad psychological outcomes in teenagers, such as depression and anxiety, are linked to high frequency and intensity of happy emotions, low frequency and intensity of negative emotions, instability of positive and negative emotions, and a lack of emotional clarity (Gohm & Clore, 2000).

Mother-Daughter Communication on Emotional Changes:

The quality of parent-adolescent communication on emotional changes has a substantial effect on the ability of adolescents to deal with dilemmas that arise throughout puberty. This kind of communication has been shown to minimize their risky activity significantly.

During adolescence, adolescent girls must adjust to the changes in their families lives, and they must also gain their parents' acceptance of them. These changes can also affect their relationships with their mothers. As a result, their mothers may be reluctant to support their daughters' decisions regarding sexual activity and illegal drug usage (Trad, 1995).

Parental norms/values and their involvement in the development of teenagers may have a positive or negative impact on their overall health and well-being, depending on how they communicate with their adolescents. Forging a deep and active connection with one's mother throughout adolescence is vital to alleviating the stress and barriers that arise from the physical and sensitive changes in participation, highlighting mothers' importance as the first and most trustworthy source of support.

Experiencing emotional variability in parent-adolescent relationships is a different approach. Instead of focusing on the content of the relationships, it aims to analyze the various aspects of these relationships through an extended period of observation. A dynamic systems approach considers a system as self-organizing, consisting of multiple attractors and a variety of stable patterns of interaction. The system maintains a consistent set of behavior over time, but it also exhibits variability.

OBJECTIVES OF THE STUDY:

- To assess the degree of comfort perceived by the Mother and Daughter during Communication.
- To Explore the Association Between Communication Frequency and Level of Comfort

RESEARCH METHODOLOGY:

In the present research, a descriptive design was used. The mothers of teenage girls constituted as the universe and sample for this study. The sample size for this research was 200 people, and it was accomplished using a random sampling method. The data was collected from the mothers of adolescent girls aged 28 to 39 who inhabit in the Sandur and Hospet of Ballari District-Karnataka.

Tools and Data Collection Methods:

Quantitative data were acquired directly from respondents employing a semi-structured interview schedule. The Schedule included demographic information, nature, communication practices, and communication difficulties. The data analysis was carried out using the Statistical Package for Social Sciences (SPSS, Version 20) for Windows.

Table No 01: Characteristics of the Respondents

Characteristics of Respondents	Mean	Median	Mode
Age of the mother	33.38	33.00	33
Number of Children's Girls	1.38	1.00	1
Number of Children's Boys	1.85	2.00	2
Number of Total Children's	3.23	3.00	3

According to the above data, the mean age of respondents is 33.38, which corresponds to the age range of 28 to 39. All of the respondents have children; the mean number of girls children is 1.38, the mean number of boys children is 1.85, and the total number of children is 3.23. The religious figures of the respondents show that two-thirds (68.8 percent) belong to the Hindu religion, one-fifth (one-fifth) belong to Muslims, and less than one-tenth (less than one-tenth) belong to the Christian faith. Nearly half of the respondents were from the OBC category,

which is higher than all other categories combined; the SC category includes more than two-fifths of the respondents, and the ST category comprises one-third of the respondents.

Table No 02: Level of Comfort felt by Mothers during Communication

Level of Comfort during communication on Emotional Changes	Frequency	Percent
Very comfortable	24	12.0
Slightly comfortable	89	44.5
Not comfortable	87	43.5
Total	200	100.0

The purpose of the data presented above is to understand the level of comfort felt by mothers during their conversations with adolescent girls about emotional changes. Out of 200 respondents, around four-ninth felt little comfort, approximately more than three-seventh felt not at all comfort, and just one-eighth felt very comfortable during communication. It is clear from the data that there is insufficient comfort during communication between mothers and daughters.

Table No 03: Frequency of Communication and Level of Comfort felt by Mothers during Communication on Emotional Changes

Emotional Changes and Communication	Very Comfortable			Slightly Comfortable			Not Comfortable			Total		
	24 (12%)			89 (44.5%)			87 (43.5%)			200 (100%)		
	Never	Rarely	Some Times	Never	Rarely	Some Times	Never	Rarely	Some Times	Never	Rarely	Some Times
Feeling shyness and distress	11 5.5%	13 6.5%	00 0.0%	40 20.0%	33 16.5%	16 8.0%	36 18.0%	36 18.0%	15 7.5%	87 43.5%	82 41%	31 15.5%
Feeling Nervous about bodily changes	14 7.0%	10 5.0%	00 0.0%	65 32.5%	24 12.0%	00 0.0%	67 33.5%	20 10.0%	00 0.0%	146 73%	54 27%	00 0.0%
Increase in annoyance	8 4.0%	10 5.0%	6 3.0%	37 18.5%	34 17.0%	18 9.0%	29 14.5%	43 21.5%	15 7.5%	74 37.0%	87 43.5%	39 19.5%
Increased imagination and curiosity	18 9.0%	6 3.0%	00 0.0%	71 35.5%	18 9.0%	00 0.0%	72 36.0%	15 7.5%	00 0.0%	161 80.5%	39 19.5%	00 0.0%
Predicaments in desires	23 11.5%	1 0.5%	00 0.0%	81 40.5%	8 4.0%	00 0.0%	71 35.5%	16 8.0%	00 0.0%	175 87.5%	25 12.5%	00 0.0%
Crave for absolute autonomy	4 2.0%	16 8.0%	4 2.0%	34 17.0%	36 18.0%	19 9.5%	23 11.5%	43 21.5%	21 10.5%	61 30.5%	95 47.5%	44 22.0%
Seeking information about male-female relationships	11 5.5%	9 4.5%	00 0.0%	76 38.0%	10 5.0%	00 0.0%	69 34.5%	12 6.0%	00 0.0%	156 78.0%	31 15.5%	00 0.0%
Desiring solitude	00 0.0%	19 9.5%	5 2.5%	00 0.0%	72 36.0%	17 8.5%	00 0.0%	73 36.5%	14 7.0%	00 0.0%	164 82.0%	36 18.0%
Affinity to the sex opposite	9 4.5%	6 3.0%	9 4.5%	10 5.0%	25 12.5%	54 27.0%	12 6.0%	30 15.0%	45 22.5%	31 15.5%	61 30.5%	108 54.0%
Greater self-care	00 0.0%	23 11.5%	01 0.5%	00 0.0%	70 35.0%	19 9.5%	00 0.0%	72 36.0%	15 7.5%	00 0.0%	165 82.5%	35 17.5%
Peer Influence	8 4.0%	10 5.0%	6 3.0%	37 18.5%	34 17.0%	18 9.0%	29 14.5%	43 21.5%	15 7.5%	74 37.0%	87 43.5%	39 19.5%
Sexual Thoughts	01 0.5%	23 11.5%	00 0.0%	14 7.0%	70 35.0%	05 2.5%	08 4.0%	72 36.0%	07 3.5%	23 11.5%	165 82.5%	12 6.0%
Fear	00 0.0%	11 5.5%	13 6.5%	00 0.0%	45 22.5%	44 22.0%	00 0.0%	52 26.0%	35 17.5%	00 0.0%	108 54.0%	92 46.0%

The above table demonstrates that the amount of comfort experienced during conversation is relatively low; out of 200 respondents, around four-ninth felt some comfort level, and approximately more than three-seventh felt no level of comfort. Notably, most issues, including feelings of shyness and anxiety, nervousness about physiological changes, increased imagination and curiosity, dilemmas in wants, and seeking information about male-female interactions, were never mentioned at any degree of comfort. This demonstrates that comfort does not correlate with communicating about emotional shifts.

Table No 04: ANOVA (Frequency of Communication*Level of Comfort felt by Mothers)

Emotional Changes and Communication	Sum of Squares	df	Mean Square	F	Sig	Result
Feeling shyness and distress	102.320	2	.451	.877	.418	NS
Feeling Nervous about bodily changes	39.420	2	.328	1.668	.191	NS
Increase in annoyance	39.420	2	2.647	8.484	.000	S
Increased imagination and curiosity	31.395	2	.061	.383	.682	NS
Predicaments in desires	21.875	2	.289	2.675	.071	NS
Crave for absolute autonomy	103.555	2	.565	1.086	.340	NS
Seeking information about male-female relationships	66.755	2	2.647	8.484	.000	S
Desiring solitude	29.520	2	.031	.206	.814	S
Affinity to the sex opposite	109.355	2	2.313	4.350	.014	S
Greater self-care	28.875	2	.280	1.945	.146	NS
Peer Influence	66.755	2	2.647	8.484	.000	S
Sexual Thoughts	109.355	2	2.313	4.350	.014	NS
Fear	49.680	2	.277	1.113	.331	NS

The ANOVA test examined the relationship between comfort level and communication frequency. An increase in annoyance, seeking information about male-female relationships, Desiring solitude, and Affinity towards the opposite sex all significantly correlate with communication frequency and degree of comfort. The variables Feeling Nervous about bodily changes, Increased imagination and curiosity, Predicaments in desires, craving for absolute autonomy, and Greater self-care had no significant relationship with communication frequency and degree of comfort.

Social Work Approach:

Social work's primary objective is to help people resolve their problems or overcome hurdles. Using the following Social Work practices, it is possible to improve communication and awareness about reproductive health throughout adolescence.

Assistance from a social worker is necessary to alleviate mothers' worry and discomfort associated with reproductive and sexual issues. Local governments must create programs to increase communication between parents and adolescent daughters. ASHA and Anganwadi staff must be educated on reproductive health issues to establish mothers as a healthy communication channel for their daughters.

Through information and communication technology, reproductive and sexual health knowledge may be passed on to future generations (ICTs). It is feasible to organize community-based activities to increase parents' awareness of reproductive health and to assist them in serving their daughters as a resource for knowledge about their reproductive health.

This issue may be addressed via the many programs and strategies implemented by the Indian government to promote teens' reproductive and sexual health. Non-governmental organizations (NGOs) must seek to close the knowledge gap between mothers and daughters. Self-help organizations may encourage moms to speak honestly about reproductive and sexual health problems with their daughters.

CONCLUSION:

The quality and quantity of communication between mothers and their adolescent daughters is limited for a variety of reasons, which can result in a wide range of problems for adolescents. As a result, mothers must understand their daughters' communicational requirements related to emotional changes and avoid developmental hazards that may occur during adolescence. To encourage a happy and barrier-free adolescent years, an integrated strategy is required to increase communication between mothers and their adolescent daughters.

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